

NZCOM CONSENSUS STATEMENT
***The role of non - regulated support people in
maternity services***

This Consensus Statement was ratified at NZCOM Annual General Meeting 5th November 2009

The New Zealand College of Midwives believes midwives are the appropriately qualified and responsible health professionals to provide safe, effective and quality care to mothers and babies throughout the childbirth experience and are necessary for an effective and safe maternity service.

The New Zealand College of Midwives believes the requirement for a midwife to attend women and provide maternity services is a fundamental right for every pregnant woman and her family

NZCOM encourage every pregnant woman to have the birth support people of her choice. Physical, emotional and psychological support during labour is an important part of intrapartum care and can be provided by a partner and/or close family/ whanau members depending on the woman's relationships. Midwives provide continuous support during labour and facilitate the involvement of the partner/supporters as appropriate and as discussed in the care plan (NZCOM Handbook for Practice 2008).

NZCOM believes that doulas, health care assistants and maternity assistants are not a substitute for midwives or an appropriate alternative for midwifery workforce shortages.

Rationale:

New Zealand women and their babies are entitled to one on one professional midwifery care from pregnancy test, throughout the antenatal period, in labour, birth and up to 6 weeks post partum. The underlying premise is that this continuity enables the establishment of a relationship that supports the women throughout all aspects of the maternity experience and ensures the best outcome possible. This care is fully funded and supported by the New Zealand government (Draft Maternity Action Plan, 2008). It is not appropriate for health authorities to replace a proven, regulated, fully funded midwifery workforce that enjoys the confidence and support of consumers with an inferior service provided by a less educated, non funded maternity workforce.

Within New Zealand the role of the midwife is nationally established and recognised within the healthcare services; internationally this is not the norm. In many countries a woman will have little or no opportunity for continuity of care from a known health professional in labour, the puerperium and with breastfeeding support within this context. Furthermore it is not uncommon in many societies for the obstetric services to exclude support people/whanau from attending the woman during childbirth. The role of the doula has developed within these maternity contexts as a person hired by the woman and outside of the family circle, that provides social and emotional support to the labouring woman; she provides no medical or clinical care.

In New Zealand women are encouraged to invite support people to their birth. Companion support generally is provided by the woman's partner, mother, sister, whanau or friends in association with the professional continuity of care provided by a registered midwife. The midwifery model of partnership in New Zealand assumes and encourages discussions prior to labour with partners and support people with the woman around the role the support person will have.

References:

Title: New Zealand College of Midwives Standards for Practice
Author: New Zealand College of Midwives
Source: Handbook for Practice, 2008. Pgs 14-24.

Title: New Zealand College of Midwives Code of Ethics
Author: New Zealand College of Midwives
Source: Handbook for Practice, 2008. Pgs 12-14.

Title: Doulas
Author: Royal College of Midwives, Position Statement 6, May 2004.
Source: Royal College of Midwives, www.rcm.org.uk/info/docs

Title: Labouring On. Birth in transition in the United States
Author: Simonds, W., Katz Rothman, B., Meltzer Norman, B.
Source: Routledge, 2007.

Title: Draft Maternity Action Plan
Author: Ministry of Health
Source: MOH, 2008.

The purpose of New Zealand College of Midwives Consensus Statements is to provide women, midwives and the maternity services with the profession's position on any given situation. The guidelines are designed to educate and support best practice.

All position statements are regularly reviewed and updated in line with evidence-based practice.